

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Paulsen

Attorney Docket No.: IGT1P026/P-256

Application No.: 09/819,152

Examiner: Jones, Scott E.

Filed: March 27, 2001

Group: 3713

Title: INTERACTIVE GAME PLAYING
PREFERENCES

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being transmitted via facsimile to the U.S. Patent and Trademark Office, Attention: Examiner Scott Jones at facsimile telephone number (703) 872-9306 on April 14, 2005.

Signed:

Tomika Thomas

AMENDMENT TRANSMITTAL

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	44	MINUS	44	00	x 25 =	x 50 = 00
Independent Claims	03	MINUS	03	00	x 100 =	x 200 = 00
Multiple Dependent Claim Present and Fee Not Previously Paid					\$180.00	\$00
Total					\$	\$00



Applicant(s) hereby petition for a one month extension(s) of time to respond to the
aforementioned Office Action.



Applicant(s) believe that no (additional) Extension of Time is required; however, if it is
determined that such an extension is required, Applicant(s) hereby petition that such an extension
be granted and authorize the Commissioner to charge the required fees for an Extension of Time
under 37 CFR 1.136 to Deposit Account No. 500388.

Please charge the required fees, or any additional fees required to facilitate filing the
enclosed response, to Deposit Account No. 500388 (Order No. IGT1P026).

04/25/2005 ☒ THAKIN

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120.00 00

Respectfully submitted,
BEVER WEAVER & THOMAS LLP

Debra P. Gishnick
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PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

TGT 1P026/P-256
09/18/19, 152

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	59	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	59 minus 20 =	39
INDEPENDENT CLAIMS	5 minus 3 =	2
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	43	Minus 59	=
Independent	2	Minus 5	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	355.00
X\$ 9=	
X40=	
+135=	
TOTAL	

RATE	FEE
BASIC FEE	710.00
X\$18=	702.00
X80=	160.00
+270=	
TOTAL	1572.00

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL	
ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL	
ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL	
ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL	
ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL	
ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL	
ADDIT. FEE	

9-13-04

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	44	Minus 59	=
Independent	3	Minus 5	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

4-14-04

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	44	Minus 59	=
Independent	3	Minus 5	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.